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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (HJ.R <del>. £818</del> ).							Complete if Known				
	PE 40.						Application N	Number	09/884,528		
ŀ	FEE TRANSMITTAL (*)						Filing Date		June 19, 2001		
		For FY	2005	1	8 0 JUD	lh 🔹	First Named		Oleg Wasyncz		
For FY 2005  Applicant claims small entity status. See 37 CFR 1.87							Examiner Na	71yul I. Shuron			
	OTAL AMOUNT O	mail entity status.		-RYAZ	30,000	753XV	Art Unit		2123		
TOTAL AMOUNT OF PAYMENT (\$) 1085 Attorney Docket No. 31122-8											
METHOD OF PAYMENT (check all that apply)											
Check Credit Card Money Order None Other (please identify):											
Deposit Account Deposit Account number: 23-3030 Deposit Account Name: Woodard, Emhardt, Moriarty, Mcnett & Henry LLP											
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)											
	Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee										
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17  Credit any overpayments to the above-identified deposit account.											
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.											
FEE CALCULATION											
1. BASIC FILING, SEARCH, AND EXAMINATION FEES											
	Application Type Utility Design Plant Reissue Provisional	Filino 300 200 200 300 200	G FEES Small Entit Fee (\$) 150 100 100 150 100	-	SEARC 500 100 300 500 0	Small Fee ( 25 5 15 25	Entity ( <u>\$)</u> 0 0 0		TION FEES Small Entity Fee (\$) 100 65 80 300 0	Fees Paid (\$)	
2.	EXCESS CLAIM	FEES							Small Entity		
	Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims							Fee (\$) 50 200 360	Small Entity <u>Fee (\$)</u> 25 100 180		
	Total Claims -20 HP = highest number of	etal Claims  -20 or HP  -20 or HP						Multiple D Fee (\$) x	ependent Claims Fee Paid (\$) =0	<b>1</b>	
	Independent Claim -3 ( HP = highest number of	or HP =-3		ee (\$) ( r than 3	Fee Pa	id (\$)					
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 C.F.R. 1.16(s).											
	Total Sheets -10	Extra Sheets 0 =	<u>s</u> /50 =		each add	ditional up to a	50 or fraction	thereof per)	<u>Fee (\$)</u> x	Fee Paid (\$)	
4. OTHER FEE(S)  Request for Continued Examination  Petition for Extention of Time (3 months)  Information Displayure Statement  510											
	Information Disclos	ure Statement								180	
SUB	MITTED BY	7	<i></i>	-/3			i-44'				
	Signature	Ray	<u> </u>	<u> </u>		(Atto	istration No. orney/Agent)	35,102	Telephone	(317) 634-3456	
		roy J. Cole					· <del></del>		Date	January 17, 2006	
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